SOLID WASTE INFORMATION AND ASSESSMENT PROGRAM REPORTING TABLE - FORM DEQ 50-25

| 1 | Facility Name | | | | | | | | | | | | |
|------------|--|--------------------------|----------------------------|-----------------------------|------------------------------|--|--|---------------------------|--------------------|-----------|-----------|----------|--|
| 2 | Permit Number | | | 3 Date Submitted to DEQ | | | | 4 Annual Reporting Period | | | | | |
| | | | | Middle | | | | | | | | | |
| 5 | Preparer's First Name | | | | Initial Last Name | | | 6 Telephone | | | | | |
| 7 | Preparer's E-mail Address An email address will be used to contact you in case of questions about this form submission. | | | | | | | | | | | nission. | |
| 8 | Has there been a change to the Annual Fee Billing Contact, Address or Telephone Number? □Y □ N | | | | | | | | | | | | |
| | Contact First Name Last Name | | | | | Contact Phone | | | | | | | |
| | Address | | | | | _ | | | | | | | |
| | City State | | | | | Zip Code | | | | | | | |
| 9 | Remaining Permitted Capacity Cubic Yards | | | | | If a facility's permitted capacity is reported in tons, please note this below in General Comments. DEQ will apply conversion factors based on the type of waste in order to calculate the volume and the number | | | | | | | |
| 10 | | | | | | | of years of permitted capacity available in the state. | | | | | | |
| 10 | Waste amounts measured in : □ Tons or □ Cubic Yards | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 11 | Originating Jurisdiction | | | | | | 11A Statement of Economic Benefits submitted? □Y □ N | | | | | | |
| | | Total Amount of | | | | | Sent Off-Site to be: (f) | | Stored On-Site:(g) | | Other (h) | | |
| Waste Type | | Waste Received (a) | Recycled On-Site (b) | Composted On-site (c) | Landfilled On-site (d) | Incinerated On-Site (e) | Recycled | Treated. | Beginning | End of | Mulched | Other | |
| | | | | | | | . 100, 0.00 | Stored, | of Reporting | Reporting | | Than | |
| | | | | | | | | Disposed | Period | Period | | Mulched | |
| 12 | Municipal Solid Waste | | | | | | | | | | | | |
| 13 | Construction/ Demolition/Debris | | | | | | | | | | | | |
| 14 | Industrial Waste | | | | | | | | | | | | |
| 15 | Regulated Medical Waste | | | | | | | | | | | | |
| 16 | Vegetative/Yard Waste | | | | | | | | | | | | |
| 17 | Incineration Ash | | | | | | | | | | | | |
| 18 | Sludge | | | | | | | | | | | | |
| 19 | Tires | | | | | | | | | | | | |
| 20 | White Goods | | | | | | | | | | | | |
| 21 | Friable Asbestos | | | | | | | | | | | | |
| 22 | Petroleum Contaminated Soil | | | | | | | | | | | | |
| 23 | Other Wastes (specify) | | | | | | | | | | | | |
| 24 | Total | | | | | | | | | | | | |
| | | | | | Ge | neral Commer | its | | | | | | |
| ĺ | | | | | | | | | | | | | |